

Christopher Lee Crawford

P.O. Box 5104

Delano, Ca 93216

July 17, 2008

Office of The Clerk, U.S District Court

FILED

JUL 21 2008

Northern District of California

1301 Clay St, Suite 400S

Oakland, Ca 94612-5212

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
OAKLAND

08-cv-2690-CW

Re Requesting For extension. Petitioner is being held in ASU² For own Protection, Requesting 30 Days more.

Dear Judge Claudia Wilkens:

I received your letter, Tuesday the 15th of July. I would like to thank you for your patient. S. Before your letter arrived, I sent in a request to the Counselor's Office; and I have also put in a 602 regarding all of my legal material has been left in the program Office, during Confinement. I have been requesting since July 3, 2008. The night your notice arrived, I sent the Paperwork to the Trust Account. I need Help Filling out Form. as soon as I receive more paper I can write more detail. Sincerely,

Christopher L. Crawford

DISTRIBUTION:
WHITE - CENTRAL FILE
BLUE - INMATE (2ND COPY)
GREEN - ASU

CANARY - WARDEN
PINK - HEALTH CARE MGR
GOLDENROD - INMATE (1ST COPY)

INMATE'S NAME
CRAWFORD, CHRISTOPHER

CDC NUMBER
V98835

REASON(S) FOR PLACEMENT (PART A)

- ☒ PRESENTS AN IMMEDIATE THREAT TO THE SAFETY OF SELF OR OTHERS
☒ JEOPARDIZES INTEGRITY OF AN INVESTIGATION OF ALLEGED SERIOUS MISCONDUCT OR CRIMINAL ACTIVITY
☒ ENDANGERS INSTITUTION SECURITY ☐ UPON RELEASE FROM SEGREGATION, NO BED AVAILABLE IN GENERAL POPULATION

DESCRIPTION OF CIRCUMSTANCES WHICH SUPPORT THE REASON(S) FOR PLACEMENT:

On Thursday, July 3, 2008, while you were housed at Kern Valley State Prison on Facility D, you approached staff stating you were in fear for your safety. During a subsequent interview, you stated that staff were tampering with your legal mail and you believed they were telling other inmates information regarding your case factors. Based on your allegations of serious staff misconduct your presence in the General Population may jeopardize the integrity of the investigation and your self proclaimed safety concerns may threaten the safety of staff, others, yourself and the security of the Institution. Therefore, you are being placed in ASU pending completion of an investigation into your allegations, safety concerns and review by ICC to determine your future housing and program needs. As a result of this placement, your custody, privilege group, visiting status, and credit earning status are subject to change. You are not a participant in the MHSDS at the any level of care. Your TABE score is above 4.0.

☐ CONTINUED ON ATTACHED PAGE (CHECK IF ADDITIONAL) ☐ IF CONFIDENTIAL INFORMATION USED, DATE OF DISCLOSURE: / /

DATE OF ASU PLACEMENT 7/3/08	SEGREGATION AUTHORITY'S PRINTED NAME W. HAMMER	SIGNATURE <i>[Signature]</i>	TITLE LIEUTENANT
DATE NOTICE SERVED 7/3/08	TIME SERVED 1215	PRINTED NAME OF STAFF SERVING ASU PLACEMENT NOTICE D. Nava	SIGNATURE <i>[Signature]</i>
INMATE REFUSED TO SIGN		INMATE SIGNATURE <i>[Signature: Christopher Lee Crawford]</i>	CDC NUMBER

ADMINISTRATIVE REVIEW (PART B)

The following to be completed during the initial administrative review by Captain or higher by the first working day following placement

STAFF ASSISTANT (SA)

INVESTIGATIVE EMPLOYEE (IE)

STAFF ASSISTANT NAME	TITLE	INVESTIGATIVE EMPLOYEE'S NAME	TITLE
IS THIS INMATE:			
LITERATE?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	EVIDENCE COLLECTION BY IE UNNECESSARY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
FLUENT IN ENGLISH?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DECLINED ANY INVESTIGATIVE EMPLOYEE	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ABLE TO COMPREHEND ISSUES?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	ASU PLACEMENT IS FOR DISCIPLINARY REASONS	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
FREE OF MENTAL HEALTH SERVICES DELIVERY SYSTEM NEEDS?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DECLINED 1ST INVESTIGATIVE EMPLOYEE ASSIGNED	<input type="checkbox"/> YES
DECLINING FIRST STAFF ASSISTANT ASSIGNED?	<input type="checkbox"/> YES		
<input checked="" type="checkbox"/> NOT ASSIGNED		<input checked="" type="checkbox"/> NOT ASSIGNED	

INMATE WAIVERS

☒ INMATE WAIVES OR DECLINES INTERVIEW WITH ADMINISTRATIVE REVIEWER ☐ INMATE WAIVES RIGHT TO 72 HOURS PREPARATION TIME
☒ NO WITNESSES REQUESTED BY INMATE

INMATE SIGNATURE
[Signature: Christopher Lee Crawford]

DATE
7-4-08

WITNESSES REQUESTED FOR HEARING

WITNESS' NAME N/A	TITLE/CDC NUMBER	WITNESS' NAME N/A	TITLE/CDC NUMBER
WITNESS' NAME	TITLE/CDC NUMBER	WITNESS' NAME	TITLE/CDC NUMBER

DECISION: ☐ RELEASE TO UNIT/FACILITY ☒ RETAIN PENDING ICC REVIEW ☒ DOUBLE CELL ☐ SINGLE CELL PENDING ICC

REASON FOR DECISION: **RETAIN PENDING ICC D/C w/ LIKE CONCERNS
SAFETY AND SECURITY OF INST.**

ADMINISTRATIVE REVIEWER'S PRINTED NAME M. GALVAN	TITLE CAPT. (A)	DATE OF REVIEW 7-7-08	TIME 1735	ADMINISTRATIVE REVIEWER'S SIGNATURE <i>[Signature: M. Galvan]</i>	TITLE CAPT. (A)
CORRECTIONAL ADMINISTRATOR'S PRINTED NAME (if necessary)		CORRECTIONAL ADMINISTRATOR'S CO-SIGNATURE (if necessary)		DATE OF REVIEW	

Christopher Lee Crawford V98835
Kern Valley State Prison
P.O. Box 5104 ASU2
Delano, Ca 93216



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Office of the Clerk U.S.
District Court Northern District
ct of California
1301 Clays + Suite 400S
Oakland, Ca 94612

9461235262-0237



7-17-08
CP